

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS		2/18
O.I.P.E. CLASSIFIER		5	3-1-99
FORMALITY REVIEW			

59158  
INDEX OF CLAIMS

3-1-99

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) ..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	4/9/63
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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BEST AVAILABLE COPY